

<p>York/Adams Drug & Alcohol Commission Policy & Procedure Manual</p>	<p>Number: T-13</p> <p>Policy: Level of Care Assessment (LOCA) Episode for Providers</p>
<p>Most Current Revision: 7/1/13</p>	<p>Page: 1 of 4</p>

I. Purpose:

To set forth parameters and protocol for individuals receiving a Drug & Alcohol Level of Care Assessment.

II. Policy:

The LOCA episode is comprised of a number of activities that are completed during a face to face session with an individual. These activities are designed to coordinate all aspects of an individual's involvement in the drug and alcohol service delivery system, including but not limited to: assessment of drug and alcohol treatment and non-treatment needs, treatment placement determination, recommendation and coordination of appropriate referrals.

All LOCA tools **MUST** contain all required DDAP components.

A LOCA **MUST** be completed within seven (7) calendar days from the date of initial contact with the individual. If this time frame is not met, the reason must be documented.

A LOCA **MUST** be completed in its entirety in one (1) session prior to referring the individual/client to the appropriate level of care, except when the individual is in need of detox.

The assessor, not the individual, must complete the clinical portions of the assessment tool. Any demographic information and/or support data gathered prior to the face-to-face interview must be reviewed by the clinician or case manager with the individual during the LOC assessment. *(Please reference DDAP Policy Bulletin No. 3-13: Pennsylvania Client Placement Criteria (PCPC))*

Once an assessment is completed, it will be valid for a period of six (6) months. The six-month time frame does not pertain to active individual. This applies to individuals who have never engaged in treatment after being assessed or who have been discharged and are seeking to reinstate services. If an individual requests to reinstate services prior to the end of the six-month period, the case manager may update the most recent assessment in lieu of completing a new assessment. However, a new PCPC Summary Sheet must be completed.

Policy: Level of Care Assessment (LOCA) Episode for Providers

Number: T-13

Date: 6/26/13

Per licensing alert 01-07 “Licensed Drug and Alcohol Treatment Providers Use of SCA Assessments as a Basis for Developing Client’s Psychosocial Histories”, said paperwork can be utilized/shared to start the client record. The Assessor is responsible for ensuring that the accepting facility receives appropriate documentation (LOCA tool) so that the accepting facility has the ability to utilize the tool as a basis for developing the client’s Psychosocial History.

Staff conducting the Case Management activities contained in a LOCA episode must receive the required core trainings within 365 days of hire. Supervision of new staff performing Case Management functions without having received required core trainings must include a combination of job shadowing and direct observation of the LOCAs. In addition, close supervision and supervisory sign off on writing documentation, to include, at a minimum the LOCA and PCPC must continue until the staff has received all appropriate training. Supervisory sign may only occur by a supervisor who has completed all required core trainings.

Required core trainings:

- Addiction 101 – 6 hours
- Confidentiality – 6 hours
- Practical Application of Confidentiality Laws and Regulations – 3 hours
- Case Management Overview – 6 hours
- Screening & Assessment – 6 hours
- PCPC – 6 hours
- Practical Application of PCPC Criteria – 3 hours
- Adolescent ASAM – 6 hours (Applicable only to those providers serving the adolescent population)

All LOCA episodes will adhere to the following:

1. Assure completion of and sign the following YADAC paperwork:

- a. Level of Care Assessment Tool*
- b. PCPC/APSS Summary Sheet
- c. TB Questionnaire
- d. Non-Treatment Needs Case Coordination Report
- e. Grievance & Appeal
- f. Maximum Client Benefits
- g. Client Rights
- h. Client Liability
- i. Charitable Choice Disclosure Form (as applicable)
- j. YADAC General Consent to Release information to:
 - *The contracted provider submitting the request for funding paperwork;
 - * Prospective treatment facility placement option(s);
- k. Consent for Re-Disclosure (as required) to:
 - *Probation (as applicable)
 - *DPW (as appropriate)
 - *(As appropriate) Consents not listed above.

** Please read and reference licensing alert 01-07 "Licensed Drug and Alcohol Treatment Providers Use of SCA Assessments as a Basis for Developing Client's Psychosocial Histories", which states said paperwork can be utilized/shared to start the client record, of which YADAC encourages.*

2. To determine the most appropriate level of care treatment, the following tools may be utilized with results presented to individual/client:
(Please reference DDAP Policy Bulletin No. 3-13: Pennsylvania Client Placement Criteria PCPC)
 - a. Complete PCPC Summary Sheet;
 - b. As appropriate, ASAM.
3. In the event a letter of recommendation is completed, it will be completed and signed in presence of the individual/client if at all possible and:
 - a. Must be directed to the individual/client or referral source;
 - b. Contents of letter **MUST** be reviewed with individual/client & may include:
 - i. Confidentiality parameters;
 - ii. Dates of Assessment;
 - iii. Nature of Assessment;
 - iv. Screening Tools Used;
 - v. Assessment Tools Used;
 - vi. PCPC; ASAM determination;
 - vii. Individual/client's prognosis;
 - viii. Final recommendations;
 - ix. Assessor signature;
 - c. The individual/client will **ALWAYS** receive a copy of the letter of recommendation. Be advised that the individual/client **MUST ALWAYS BE APPRISED** of the final results of the LOCA **BEFORE** this information is released outside of the assessment process.
4. A Client Case Note entry will be made in the individual/client chart according to the YADAC Client Case Notes policy T-7.
5. For detox level of care placement, the assessor may:
 - a. With a valid signed consent, contact the WDR call center & make appropriate arrangements;
 - b. Can give the individual/client the WDR call center number;
 - c. Can contact the WDR Call Center & have the individual/client provide needed information;
 - d. Can send all appropriate forms/documentation to accepting facility
 - e. In all aforementioned scenarios, documented follow-up in the individual/client's chart is required.

6. For rehab or half-way house placement, the assessor will:
 - a. Ensure that funding is available AND that funding has been approved;
 - b. Make appropriate referral AND/OR secure a bed-date;
 - c. Will ensure that transportation has been arranged;
 - d. Will coordinate with those entities involved with the individual/client (that is: probation, family, prison, etc.) regarding logistics to ensure that the individual/client is placed accordingly AND/OR it is determined that the individual/client is no longer in need of the placement.
 - e. Will send all appropriate forms/documentation to accepting facility
7. For OP/IOP/Partial Hospitalization, the assessor will:
 - a. With a valid signed consent, make the appropriate referral, complete a follow-up to referral, and document in individual/client chart;
 - b. For community based individual/clients coordinate/instruct the individual/client's intake scheduling by calling the provider directly and scheduling or providing the individual/client with contact numbers AND complete follow-up & documentation in the individual/client chart;
 - c. For the community based individual/clients, will remain involved until placement is secured and/or it is determined that the individual/client is no longer interested in placement;
 - d. For those individual/clients confined to prison, given it is typically not known when the individual/client will be released, a copy of the letter of recommendation must be provided to the individual/client.
 - e. Will send all appropriate forms/documentation to accepting facility
8. The Assessor is responsible for ensuring that ALL appropriate forms/documentation is sent to the accepting facility.
9. ALL forms/documents referenced in this policy MUST be maintained in the client chart. These documents must be completed correctly and entirely, will be considered a permanent part of the client record, AND shall be made available at the time of the Quality Assurance Reviews and/or Monitoring Site Visit.

Approved By:

YADAC Administrator

Date